



Chesterfield County Department of Real Estate Assessments
REQUEST TO LEVY ROLL-BACK TAXES
FOR PROPERTY QUALIFYING FOR LAND USE ASSESSMENT

6701 Mimms Loop
P. O. Box 40
Chesterfield, VA 23832

Telephone: (804) 748-1321
Fax: (804) 717-6278
Email: assessor@chesterfield.gov

I (We), the undersigned property owner(s) or the duly authorized agent thereof hereby request the Director of Real Estate Assessments in and for Chesterfield County to calculate a roll-back for all applicable years on the hereinafter described property. (**Attach plat of survey** or set forth a detailed written description).

Owner: _____ Acreage: _____

Tax Id: _____

Description: _____

I (We), fully understand that this request will cause such tax to be levied by the Treasurer of Chesterfield County in a timely manner. Further, this real estate is to be removed from the Special Assessment and Taxation Program.

Owner/Agent

Date

Owner/Agent

Date

Name and mailing address of person responsible for roll-back bill.

Contact Susan N. Garling, the Land Use Administrator for Chesterfield County,
if you have any questions regarding roll-back tax and/or the Special Assessment Program at (804) 748-1321.

Submit to:

Department of Real Estate Assessments
C/o Susan N. Garling
6701 Krause Road West / P. O. Box 40
Chesterfield, VA 23832
or
Fax to: (804) 717-6278

Providing a **FIRST CHOICE** community through excellence in public service.